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LUMPKIN/WELCH
CDC FOR BLOUNT/PETROSKY

SENSITIVE
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E.O. 12958: N/A

TAGS: [TBIO](#) [SENV](#) [AMED](#) [CASC](#) [KSCA](#) [IN](#)

SUBJECT: HIGHLIGHTS OF NIH DIRECTOR'S OCTOBER VISIT TO INDIA

REF: New Delhi 1783

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¶1. (U) Summary: The Department of Health and Human Services (DHHS), National Institutes of Health (NIH) Director Dr. Elias A. Zerhouni and his delegation came at an opportune time to India as India announced plans to establish a new Department of Health Research within the Ministry of Health and Family Research and focus on translational health sciences within the Ministry of Science and Technology. Dr. Zerhouni met with India's Prime Minister, Ministers, and senior officials of the Government of India (GOI), and interacted with senior scientists and students during the course of his visit. These meetings helped energize the commitment for health and biomedical research collaborations. End Summary.

¶2. (U) Two agreements were signed during Dr. Zerhouni's visit to India with the GOI: the Joint Statement on the Development of Low-Cost Diagnostic and Therapeutic Medical Technologies, and the Letter of Intent on Translational Research. In addition, an Indo-U.S. meeting on Translational Health Sciences was organized on October 4. Dr. Zerhouni gave a keynote presentation at this meeting. On October 5, the Ministry of Health and Family Welfare announced the launch of the Department of Health Research (DHR). Dr. Zerhouni gave the ICMR Oration award at this event, which was attended by 300 scientists from around India. Zerhouni's delegation included Dr. Roderic Pettigrew, Director of the National Institute of Biomedical Imaging and BioEngineering (NIBIB), Dr. Roger Glass, Director, Fogarty International Center (FIC), Dr. John Haller, Program Director, Division of Applied Science and Technology, NIH, and Mr. Thomas Mampilly of FIC.

Meeting with India's Prime Minister Dr. Manmohan Singh

¶3. (U) On October 5, Dr. Zerhouni, Dr. Pettigrew and Dr. Roger

Glass accompanied by Ambassador David C. Mulford met with India's Prime Minister (PM) Dr. Manmohan Singh. Dr Zerhouni commended the PM for his foresight in the formation of the Department of Health Research headed by a Secretary and the substantial increase in it's funding. Dr Pettigrew and Dr. Roger Glass provided a brief overview of NIH collaborations.

14. (U) PM Singh particularly thanked Dr Zerhouni for the visit since this can help energize ongoing collaborations and move forward efforts to improve science for health in India. Ambassador Mulford raised the issue of the importance of venture capital in advancing health technology and the need to reward scientists and their institutions, an issue to which the PM did not directly respond. The PM commented about "old guard" scientists not allowing the growth of young scientists as well as the importance of peer review in promoting and institutionalizing excellence in science. The PM also expressed a strong desire to meet Dr. Zerhouni again when he goes to the U.S. next.

Ministry of Science and Technology, Department of Biotechnology - Interactions

15. (U) India is in the process of establishing the UNESCO Regional Center for Education and Training in Biotechnology at Faridabad, near New Delhi as an autonomous institution supported by the UNESCO, and India's Department of Biotechnology (DBT). The UNESCO center is to create a physical infrastructure and human resource in critical platform technologies, provide an education curriculum in interdisciplinary areas of biotechnology, develop a world class program through international partnerships, and create biotechnology expertise in the South Asian Association of regional Cooperation (SAARC) region.

16. (U) Science Minister Kapil Sibal, in his meeting with Dr.

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Zerhouni and at the Indo-U.S. Meeting on Translational Health Sciences spoke of the need for new discovery through innovation and public funding to foster greater innovation through creation of an eco-system. Sibal said the NIH had shown the way with its large investment in health-related research (NIH FY 2007 budget is USD 29.2 billion) and looked forward to enhanced partnerships with India.

17. (U) Sibal stated that science is universal and industry needs to provide local solutions. He also stated that India needs to develop globally acceptable standards and regulatory systems through an eco-system of connectivity. Sibal said "we need no barriers to people, services and products." Sibal acknowledged that in India "freedom of joints" is essential, by freeing universities that acted in isolation with no linkage to delivery systems, and with different forms of incentives.

18. (U) DBT's Secretary M.K. Bhan of the Ministry of Science and Technology (MOST) said the need of the hour for health care in India is to create a cadre of Indians with the right skills to bridge gaps, increase the exchange of ideas through international partnerships. He emphasized the need for political leadership for institution building.

19. (SBU) In a conversation with Director Zerhouni and Mission Health Attache, Secretary Bhan admitted that the existing GOI systems and processes are the biggest hurdles for him. He mentioned that he has started working "outside the system" by granting funds to outside entities and institutions, which eliminates political interventions and pressures. He also mentioned his goal to develop several high-technology, biotechnology and health institutions over the next 3-5 years. These new centers of excellence will bring opportunities for Indian and multinational Pharma and biotech companies to collaborate and invest.

110. (SBU) Secretary Bhan also mentioned to Director Zerhouni and Health Attache the need for coordination and consolidation of programs, to complement and promote real-time information sharing. His comment was directed at several USG agencies that collaborate

with Indian institutions and agencies, but seem to be unaware of each others programs and interests.

¶11. (U) On October 4, 2007, Dr. M.K. Bhan and Dr. Zerhouni signed the Letter of Intent between the DBT and the NIH to initiate new collaboration in translational health research. This collaboration will expedite research and development needed of new drugs, vaccines, diagnostics, and medical devices. In addition, NIBIB Director Pettigrew and DBT Secretary Bhan signed a bilateral agreement on Development of Low-Cost Diagnostic and Therapeutic Medical Technologies.

¶12. (U) Deputy Chief of Mission (DCM) Steven White delivered remarks at the Indo-U.S. Meeting on Translational Health Sciences stressed that an effective working relationship exists between the two countries in the area of health and biomedical research. DCM White emphasized the need to develop a technical and policy framework in India that is compatible with international norms.

¶13. (U) In his key note address at the Indo-U.S. Meeting on Translational Health Sciences, Dr. Zerhouni spoke of the exciting time in science and the ability to understand disease at a molecular level and the role of the individual genetic make-up in the development of diseases. This is moving the field in the direction of pre-emptive and personalized medical care. Zerhouni stressed the importance of political leadership, sustained financial commitment, autonomous governance and openness to scientific interaction, and exploration of high risk, high reward ideas.

¶14. (U) DBT organized a meeting on Health Technologies at the
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Indian Institute of Technology (IIT), Delhi. The meeting was attended by IIT faculty and students from the IIT and All India Institute of Medical Sciences (AIIMS). Dr. Zerhouni stressed the role of interdisciplinary interaction between biological, medical, and physical sciences and the need for convergence between physics and biology. Dr. Zerhouni said the potential existed for more cross-fertilization. He said that there is a wide range of areas where the IIT's could collaborate with the NIH. IIT officials informed the delegation of the proposed setting up of a School of Biological Sciences at IIT Delhi, and also of the intent to start an academic program in public policy in 2008 that would cover areas such as health sciences, energy and environment. The IIT officials also gave details of the new collaboration with Stanford University on bio-design, supported by the DBT.

Ministry of Health Launch of the Department of Health Research

¶15. (U) At the launch of the Department of Health Research (DHR) and the Indian Council of Medical Research (ICMR) Annual Day Oration, Health Minister Anbumoni Ramadoss said that the DHR will be an autonomous arm of the Ministry of Health and Family Welfare with a substantial increase in budget. Ramadoss said that the DHR represents a positive signal to the health science and health care industry. The DHR will be engaged in starting a series of institutions with particular focus on cancers, diabetes, chronic and cardiovascular diseases, and the silent epidemic of mental health disorders.

¶16. (U) Minister Ramadoss said that his goal is to increase the health budget five fold this year and substantially more in the next year. He also stated the importance of close collaboration with the Ministry of Science and Technology.

¶17. (U) Dr. Zerhouni delivered the ICMR Oration Award titled "Major Trends for Biomedical Research in the 21st century - The view from NIH" on the occasion of the ICMR Annual Day and received the Award from the Health Minister Ramadoss. Dr. Zerhouni spoke of the need to harmonize regulations globally so we have no barriers.

Functions of the DHR

¶18. (U) The functions of the newly formed DHR are:

- Promotion and co-ordination of basic, applied and clinical research including clinical trials and operational research,
- Promote and provide guidance on research governance issues, including ethical issues in medical and health research,
- Inter-sectoral coordination and promotion of public-private-partnership in medical, biomedical and health research related areas,
- Advanced training in the research areas of medicine and health, including grant of fellowships for such training in India and abroad,
- International co-operation in medical and health research,
- Providing technical support during epidemics and natural calamities,
- Investigation of outbreaks due to new and exotic agents and development of preventive tools,
- Matters relating to scientific societies and associations, charitable and religious endowments in medicine and health research areas,
- Coordination between organizations and institutes under the Central and State Governments in areas related to medicine and health, and,
- All existing functions of the ICMR.

India's Ministry of Health - Interactions

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¶19. (U) Health Minister Ramadoss in his meeting with Dr. Zerhouni and his delegation said the Central Drug Authority of India (CDAI) would be based along the lines of the U.S. FDA. He also spoke of the passing of the Bill for the creation of the Food Safety and Standards Authority of India (FSSAI) (See Reftel). Ramadoss said the biomedical equipment and devices draft bill would be a part of the CDAI.

¶20. (U) Science Minister Kapil Sibal clarified the confusion regarding regulation of medical devices and the proposed legislation within the Indian Parliament. The Ministry of Science and Technology (MOST) would be the nodal agency for the regulation of medical devices. ICMR Director General N.K. Ganguly said that the MOST has reached out to the Ministry of Health (MOH) in this regard.

¶21. (U) Minister Ramadoss reached out to Dr. Zerhouni for collaboration in developing vaccines for malaria and TB, low cost cochlear implants, cost-effective diagnostic kits for point of cure technologies for malaria, TB, HIV/AIDS, and tropical diseases. Ramadoss said that with the support of the Centers for Disease Control and Prevention (CDC) the Integrated Drug Surveillance Program is on-going through an India-wide network. Ramadoss spoke of establishing a Medical Park for manufacturing medical devices and diagnostics and the Vaccine Park for vaccine manufacturing in Chennai.

¶22. (U) Minister Ramadoss said that the most important health care delivery system was the launch of the National Rural Health Mission (NRHM) which enabled the GOI to undertake a wide range of interventions aimed at improving public health delivery at all levels, although it took about 75 percent of the MOH budget.

¶23. (U) Dr. Zerhouni in his response said that with the strong relationship of collaboration through the NIH there were many avenues for more co-operation, particularly in the areas of infectious diseases, chronic diseases, cancer research, diabetes, ageing, avian influenza, vaccine research and capacity building.

¶24. (U) Dr. Zerhouni requested the Minister to look into expediting the review and approval process of NIH-funded grants by the Ministry of Health and Family Welfare. Minister Ramadoss promised to sort out the problem of the slow speed of the Indian grant review. MOH Secretary Naresh Dayal stated that the newly created DHR will be in

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position to expedite the clearing process of NIH grants.

Interactions with Faculty of AIIMS and NIH Grantees

¶25. (U) Dr. Zerhouni and his delegation interacted with faculty of the AIIMS and invited NIH Grantees. The delegation exchanged views on a host of issues.

Interactions with the Public Health Foundation of India

¶26. (U) Director Zerhouni met with the President of Public Health Foundation of India (PHFI), Dr. Srinath Reddy. Dr. Reddy gave an overview of PHFI, including the support HHS and the U.S. Mission in Delhi provided in establishing PHFI. Reddy stated that three Schools of Public Health are being developed at this time, with plans to establish a total of seven schools in India. PHFI is sending professionals under their faculty development program to several U.S. Schools of Public Health. Reddy also stated that the PHFI schools will enroll students from other countries in the region.

¶27. (SBU) Dr. Zerhouni reviewed NIH's programs in India and with

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the signing of the Joint Statement and Letter of Intent noted in paragraph 2, the number of agreements between NIH and India now totals nine; a high-water mark for U.S. - India health collaboration. The continued success of our partnership can have a significant impact on the whole gamut of U.S. - India bilateral relations. To that end, health collaboration should be amplified as a strategic part of the overall U.S. - India relationship.

¶28. (U) This cable was cleared by Dr. Roger Glass, Director, NIH/FIC.

MULFORD